PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

SEP 0 3 2004

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

appropriate. All further core	respondence including the leading of the leading of the leading in the leading in the leading the leading the leading in the l	Patent advance orde	ers and notification	or maintenance tees	uired). Blocks 1 through 4 s will be mailed to the current s; and/or (b) indicating a sep	. correspondence address as
CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) 909 7590 06/03/2004 PILLSBURY WINTHROP, LLP P.O. BOX 10500 MCLEAN, VA 22102				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.		
				(Depositor's name)		
				(Signature)		
						(Date)
APPLICATION NO.	PPLICATION NO. FILING DATE FIRST NAMED INV		RST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/004,428	12/06/2001	Philip Rodney Ky		ok	P 282771	9777
TITLE OF INVENTION: N.	ASAL MASK CUSHION A	SSEMBLY				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PI	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330		\$300	\$1630	09/03/2004
EXAMINER		ART UNIT	· C	LASS-SUBCLASS	7	
LEWIS, AARON J		3743		128-206120	_	
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. names of up agents OR, alt firm (having a agent) and the				on the patent front page, list (1) the constraint of a registered patent attorneys or rnatively, (2) the name of a single a member a registered attorney or names of up to 2 registered patent ents. If no name is listed, no name		
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) ResMed Limited North Ryde North Ryde						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🚨 individual 🗸 corporation or other private group entity 🚨 government						
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):						
☑ Issue Fee ☑ A check in the amount of ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐						
☐ Publication Fee ☐ Payment by credit card. Form PTO-2038 is attached. ☐ Advance Order - # of Copies ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpaym Deposit Account Number 14-1140 (enclose an extra copy of this form).						credit any overnavment to
	eopies	ì	Deposit Account Nu	imber 14-1140	(enclose an extra	copy of this form).
	sted to apply the Issue Fee a	nd Publication Fee (i	f any) or to re-apply	y any previously paid	issue fee to the application id	entified above.
Paul T. Bowen, Reg. No. 38,009 Sept. 3, 2004 NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.				09/0//20 01 FC:15 02 FC:15	004 EABUBAK2 00000132 501 504	10004428 1330.00 gp 300.00 gp

TRANSMIT THIS FORM WITH FEE(S)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.